



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

received 6/21/14-CD REPORT #7

REVIEWED

By Carol Day at 10:33 am, Jul 10, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and Send copy to Department of Health and Senior Services; retain original in department file.

| | | |
|------------------------------------------------------------------------------|----------------------------|----------------------------------|
| ALCO SENSOR IV SN 105451 | PRINTER SN 096.3580.925 | DATE OF INSPECTION 06/15/2014 |
| LOCATION OF INSTRUMENT (STREET AND CITY) 301 S Main St, Excelsior Springs | | TIME OF INSPECTION 10:14 am |

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth LOT # 14030 EXP. DATE 01/20/2016

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN DR5383 SIMULATOR EXP DATE 06/17/2014

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .099

TEST 2 .100

TEST 3 .099

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

| | | | | | | | | | | | |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|
| REFUSALS | 0 | (0-.04) | 0 | (.05-.09) | 1 | (.10-.14) | 1 | (.15-.19) | 1 | (OVER .19) | 1 |
|----------|---|---------|---|-----------|---|-----------|---|-----------|---|------------|---|

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE

[Signature]

PRINT NAME

Sgt Brian K Kennedy

TYPE II PERMIT NUMBER/EXPIRATION DATE

230073 04/26/2015

TELEPHONE NUMBER

(816) 630-2000

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is January 20, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

IS 10 Serial no: 1000
Version no: 1000

TEST RECORD 00002

Date: 06/10/14 Time: 10:18

Air Blanks
06/10/14 10:18 .000
Calibration Check
06/10/14 10:18 .000

Subject: Blank

MONTHLY MAINT
Subject: I.H.

Operator: Blank

SGT BK KENNEDY 911
Location:

301 S. MAIN

EX SPRINGFIELD, MO

IS 10 Serial no: 1000
Version no: 1000

TEST RECORD 00002

Date: 06/10/14 Time: 10:18

Air Blanks
06/10/14 10:18 .000
Calibration Check
06/10/14 10:18 .000

Subject: Blank

MONTHLY MAINT
Subject: I.H.

Operator: Blank

SGT BK KENNEDY 911
Location:

301 S. MAIN

EX SPRINGFIELD, MO

IS 10 Serial no: 1000
Version no: 1000

TEST RECORD 00001

Date: 06/10/14 Time: 10:18

Air Blanks
06/10/14 10:18 .000
Calibration Check
06/10/14 10:18 .000

Subject: Blank

MONTHLY MAINT
Subject: I.H.

Operator: Blank

SGT BK KENNEDY 911
Location:

301 S. MAIN

EX SPRINGFIELD, MO

IS 10 Serial no: 1000
Version no: 1000

TEST RECORD 00001

Date: 06/10/14 Time: 10:18

Air Blanks
06/10/14 10:18 .000
Calibration Check
06/10/14 10:18 .000

Subject: Blank

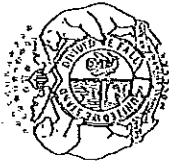
MONTHLY MAINT
Subject: I.H.

Operator: Blank

SGT BK KENNEDY 911
Location:

301 S. MAIN

EX SPRINGFIELD, MO



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

2

PERMIT
TYPE II

BRIAN K KENNEDY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 04/26/2013

NUMBER 230073

EXPIRES 04/26/2015

MO 590-0771 (6-10)

W. A. Vester

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David Vester
Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)